



Bib Data Sheet



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<b>SERIAL NUMBER</b> 09/574,352	<b>FILING DATE</b> 05/20/2000 <b>RULE</b>	<b>CLASS</b> 714	<b>GROUP ART UNIT</b> 2785	<b>ATTORNEY DOCKET NO.</b> 102689-5	
<b>APPLICANTS</b> JOSEPH D. KIDDER, ARLINGTON, MA ; DANIEL J. SULLIVAN JR., HOPKINTON, MA ;  <b>** CONTINUING DATA *****</b> <i>None ref 02 to b</i>  <b>** FOREIGN APPLICATIONS *****</b> <i>None ref 02 to b</i>  <b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **</b> <b>** 06/21/2000</b>					
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged <i>ref</i> Examiner's Signature _____ Initials _____		<b>STATE OR COUNTRY</b> MA	<b>SHEETS DRAWING</b> 41	<b>TOTAL CLAIMS</b> 4	<b>INDEPENDENT CLAIMS</b> 1
<b>ADDRESS</b>					
21125					
<b>TITLE</b>					
CONFIGURABLE FAULT RECOVERY POLICY FOR A COMPUTER SYSTEM					
<b>FILING FEE RECEIVED</b> 345	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		